



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
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Bib Data Sheet

CONFIRMATION NO. 9239

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/539,874	03/31/2000 RULE	222	3754	A-6980

APPLICANTS

William M. Scott, Hampstead, CANADA;
Christopher Weldon, Ste Clotilde, CANADA;

OK 269

** CONTINUING DATA ***** None 269

** FOREIGN APPLICATIONS ***** None 269

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** OK 269
** 06/14/2000

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after	CANADA	14	39	1
Verified and Acknowledged	Allowance <u>Kathleen J. Premer</u> <u>KJP</u> Examiner's Signature Initials				

ADDRESS

20741

TITLE

Device for dispensing substance from a cartridge

FILING FEE RECEIVED 516	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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Bib Data Sheet

CONFIRMATION NO. 9239

SERIAL NUMBER 09/539,874	FILING DATE 03/31/2000 RULE	CLASS 222	GROUP ART UNIT 3754	ATTORNEY DOCKET NO. A-6980
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APPLICANTS

William M. Scott, Hampstead, CANADA;
Christopher Weldon, Ste Clotilde, CANADA;

**** CONTINUING DATA *********** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ****

** 06/14/2000

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY CANADA	SHEETS DRAWING 14	TOTAL CLAIMS 39	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

20741

TITLE

Device for dispensing substance from a cartridge

FILING FEE RECEIVED 516	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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